City of Riverside, California
Personnel Policy and Procedure Manual

Number: V-6 Effective Date: 07/02

SUBJECT: EDUCATION REIMBURSEMENT PROGRAM

PURPOSE:

To encourage employees of the City to take educational courses and training programs which shall enhance and broaden the performance of their present duties and prepare them for advancement opportunities.

POLICY:

Efforts shall be made to provide training and educational assistance for all levels in the City, from those requiring a minimum of specialized skills to those requiring higher education preparation. Completion of a training or educational course shall not guarantee promotion or advancement of an employee, but is intended to expand skills and knowledge, thus providing the individual with higher levels of opportunity and performance.

The funds for the Education Reimbursement Program shall be part of the City-wide training funds budgeted by the Human Resources Department/Training Division. Reimbursement may only be received for courses which are job related or lead toward possible advancement in the City.

The Human Resources Director shall be responsible for administering the Education Reimbursement Program and shall have the authority to approve or deny a request for education assistance. Potential benefit of the course to the City, the recommendation of the department, the employee's work performance, length of service, previous educational background, and the amount and types of courses previously taken by the employee may be considered. Approval shall be limited to courses offered by accredited colleges, universities, community colleges, adult education, or vocational programs. Accredited courses offered "on-line" through distance learning are included. Normally, correspondence courses shall not be approved for reimbursement under this program.

Requests shall be reviewed and approved on an ongoing basis. The employee must receive the recommendation of the department head and approval by the Human Resources Director prior to starting a course. In the event of insufficient budgeted funds, approvals shall be tentative, placed on a waiting list, and subject to final approval upon the availability of budgeted funds. The waiting list shall terminate at the end of each fiscal year. Only courses that receive final approval shall be reimbursed. In no event will a course be reimbursed if there are insufficient funds.

When an employee is required by the department to attend a particular course or seminar, normally the expense shall be the responsibility of the respective department and employee.

As a general rule, time spent on approved educational courses should be outside of scheduled working hours and shall not be considered as time worked for the City.

Reimbursement under this program will be up to $333 per quarter, or $500 per semester, but will not exceed $1,000 per fiscal year. It includes the cost of registration, tuition, books and lab fees. Special fees, food/meals, parking and mileage/transportation are not eligible for reimbursement. To receive reimbursement, students must attain a "C" grade or better. Pass\fail or no credit courses are considered to be "C" grade or better.

Employees are responsible for any income tax liability that may incur under this program.

ELIGIBILITY REQUIREMENTS

All regular full-time employees who have completed one year of full-time employment and at least one probationary period are eligible to apply for education reimbursement.

PROCEDURE:

Responsibility		Action
Employee	1.	Complete an Education Reimbursement Request (Form 1210.004) secured from the Human Resources Department.
	2.	Make request for approval prior to the beginning of each class, school semester or quarter.
	3.	Submit Education Reimbursement Request to the employee's department.
Department Head	4.	Make appropriate recommendations and forward to the Human Resources Director.
Human Resources Director	5.	Review and approve/disapprove request.
Employee	6.	Submit Education Reimbursement Request for Payment (Form 1210.005) with registration confirmation and verification of grades to the Human Resources Director within 45 days of course completion.

Human Resources Department   7.   Prepare Request for Payment and submit to Finance.

Finance Department   8.   Make reimbursement to the employee.

Attachments:
1. Education Reimbursement Request (1210.004)
2. Education Reimbursement Request for Payment (1210.005)

CITY OF RIVERSIDE
EDUCATION REIMBURSEMENT PROGRAM APPLICATION

Name:_____ Phone:_____ Date of Request:_____
            (Print)

Department/Division:_____ Classification:_____

PART I: EDUCATION REIMBURSEMENT REQUEST (Complete and submit before enrollment.)

School:_____

Address:_____

Title of Course(s)	Course Dates From - To	Number of Units	Cost of Tuition
1.			
2.			
3.			

Estimated cost for registration, books and lab fees. _____

_____

How will this course enhance and broaden the performance of your regular duties or prepare you for advancement opportunities?

_____

_____

_____

I understand that this training is voluntary, is not considered hours of work and/or employment, and no compensation is earned.

_____   _____
        Signature of Employee   Date

For Office Use:

Recommendation: ☐ Yes   ☐ No

_____   _____
        Department Head   Date

Comments:_____

Recommendation: ☐ Yes   ☐ No

_____   _____
    Human Resources Director/Designee   Date

Comments:_____

                                                 Estimated Reimbursement:_____

Form 1210.004

CITY OF RIVERSIDE
EDUCATION REIMBURSEMENT REQUEST FOR PAYMENT
(Complete and submit within 45 days after course work is completed)

Name:_____
(Print)

Department/Division:_____

Employee Number:_____

Classification:_____

Request Payment to: (Name and complete address)

REQUEST FOR EDUCATION REIMBURSEMENT PROGRAM REFUND

I have successfully completed the course work, attained the required grade and request reimbursement of tuition and fees in accordance with the Education Assistance Program. Registration confirmation, certificates of grades and receipts for tuition are attached.

DETAIL OF EXPENSES				
Tuition	Registration	Books	Lab Fees	Other (List)

_____
Signature of Employee

_____
Date of Request

For Office Use:

Costs for Reimbursement: $_____

Reimbursement Amount: $_____

Comments:_____

ACCOUNT SUMMARY DISTRIBUTION

GL KEY	OBJECT	JL KEY	OBJECT	W/O NO:	AMOUNT

Certification of Delivery of above	APPROVED FOR PAYMENT
Signature Date	Human Resources Director
APPROVED FOR PAYMENT	APPROVED FOR PAYMENT
Finance Director Date	City Manager (if required)

Form 1210.005
Policy No. V-2